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SIGNATURE:

PROFIT Mar 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)SPLIT SECOND TIMING, INC. Principal Place of Business Mailing Address 2211 CHARLESTON 2211 CHARLESTON FT. LAUDERDALE FL 33326 FT. LAUDERDALE FL 33326 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/28/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0224054 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ENTIN, RICHARD C. 8411 W. OAKLAND PARK BLVD. 82 ss (P.O. Box Number is Not Acceptable) SUNRISE FL 33351 HARLESTON 83 84 LAUDERDALE 333 K 08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered on change was authorized by the corporation's board of directors. I hereby accept the appointment as registered on 607.0505, Florida Statutes 11. Pursuant to the provoffice or registered and 607 STERI 10 HAKD SIGNAT 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change STERN, RICHARD NAME 1.2 NAME 2211 CHARLESTON STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change ngitibhA NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information indicated on this angual report or so officer or director of the corporation Block 12 or Block 13 if chapped, or es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in eiver or t 1CHARD

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